**Note:** Sample letter to be adapted on Local or state health department letterhead and to be used when case is reported <u>within 14 days</u> after case's last day in child care.

## PARENT AND EMPLOYEE ADVISORY LETTER Meningococcal Disease in a Child Care Center

Dear Parents of (name of child):

	meningococcal infectio an infection or mening erson with a meningoc your child was in	n) - use applicable des gitis in people of any a occal infection have a <b>the same classro</b>	cription]. The dis age. Persons who slight risk of dev om with the	ease is caused by the have had close, reloping a serious child with the
meningococcal infecti				
theantibiotic, called rifa		partment recomme		
carrying it, which may he contact your private phy allergic to rifampin and however other antibiotic should remove the lense urine a reddish-orange contact.	elp protect contacts from the protect contacts from the protect of	om developing a seriou nedication for your chil ant or who might be p ese circumstances. Pe od as rifampin may dis	us meningococcal delay. Persons who oregnant should resons wearing so	infection. Please are known to be not take rifampin, oft contact lenses mpin will turn the
Watch for the followin nausea, vomiting or weeks, you should conhealth care provider meningitis) or (a series)	rash. If your child ontact his/her health that your child was	develops any of the care provider, expl in contact with a c	ese symptoms i lain the sympto	n the next few ms and tell the
Please feel free to conta Department of Public H have questions regarding	ealth, Center for Acute			
Note for child care en direct saliva contact should also receive ar	with the child with	meningococcal dise	ase in the wee	k before illness
Sincerely,				
(Name)	(Local	Health Department)		_

**NOTE FOR YOUR DOCTOR:** Rifampin for prevention of meningococcal disease is 10 mg/kg twice daily for 2 days (maximum dose 600 mg/dose or 1200 mg/day); for infants <1 month of age, 5 mg/kg twice daily for 2 days. Ciprofloxacin 500 mg orally once for nonpregnant persons 18 or older or Ceftriaxone 125 mg IM once for persons up to age 15, for those  $\geq$ 15 years of age 250 mg IM once.